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NOTICE OF ALLOWANCE AND FEE(S) DUE

28390

7590

06/09/2006

MEDTRONIC VASCULAR, INC. IP LEGAL DEPARTMENT 3576 UNOCAL PLACE SANTA ROSA, CA 95403

EXAMINER

NAKARANI, DHIRAJLAL S

ART UNIT PAPER NUMBER

1773

DATE MAILED: 06/09/2006

APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/670 065	10/07/2003	Chirag B Shah	P206P EI/(1737 073P EIO)	4574

TITLE OF INVENTION: THROMBORESISTANT COATED MEDICAL DEVICE

APPLN. TYPE SMALL ENTITY		ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	09/11/2006

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

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I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status above is to be removed, check box 5b on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

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INSTRUCTIONS: This for appropriate. All further cor- indicated unless corrected to maintenance fee notification	respondence including the below or directed otherwise	smitting the ISSU Patent, advance order in Block 1, by (a)	E FEE and PU ders and notific) specifying a	UBLIC cation new co	ATION FEE (if required of maintenance fees worrespondence address)	ired). Blocks 1 through 5 vill be mailed to the curren ; and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for	any change of address)			Fee(s) Transmittal. Th	mailing can only be used f is certificate cannot be used il paper, such as an assignm of mailing or transmission.	for any other accompanying
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MEDTRONIC V	ASCULAR, INC.				Cer I hereby certify that th	tificate of Mailing or Tran is Fee(s) Transmittal is beir	smission 2 deposited with the United
IP LEGAL DEPAR 3576 UNOCAL PL	RTMENT				States Postal Service vaddressed to the Mai transmitted to the USP	is Fee(s) Transmittal is beir vith sufficient postage for fil Stop ISSUE FEE address TO (571) 273-2885, on the	st class mail in an envelope above, or being facsimile date indicated below.
SANTA ROSA, CA	A 95403						(Depositor's name)
						· ·	(Signature)
							(Date)
APPLICATION NO.	FILING DATE	F	FIRST NAMED I	INVEN	ror	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/679,965	10/07/2003		Chirag B.	Shah		P296REI/(1737.073REI0)	4574
TITLE OF INVENTION: T	HROMBORESISTANT CO	ATED MEDICAL	DEVICE				
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nonprovisional	NO	\$1400			\$0	\$1400	09/11/2006
EXAM	INER	ART UNI	IT	CL	ASS-SUBCLASS		
NAKARANI, I	OHIRAJLAL S	1773			623-001150	·	
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate	e address or indication of "For lence address (or Change of 22) attached. ion (or "Fee Address" Indica or more recent) attached. Use	Correspondence	(1) the name or agents OR (2) the name registered at	es of u R, altern e of a s ttorney patent	ingle firm (having as a or agent) and the nam attorneys or agents. If	t attorneys 1	
		elow, no assignee of of this form is NOT	data will appear a substitute for	r on the or filing	•• •	ee is identified below, the o	locument has been filed for
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the pate	ent) :	☐ Individual ☐ Co	orporation or other private gr	oup entity Government
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5 Cl	/C		Deposit Acc	count r	Number	(enclose an ext	ra copy of this form).
	(from status indicated above MALL ENTITY status. See 1	•	☐ b. Applican	nt is no	longer claiming SMAI	LL ENTITY status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and Pointerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) v ords of the United States Pate	ue Fee and Publicati vill not be accepted ent and Trademark (ion Fee (if any) from anyone o Office.	or to to the	e-apply any previousl an the applicant; a regi	y paid issue fee to the applic stered attorney or agent; or t	ation identified above. he assignee or other party in
Authorized Signature					Date		
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This collection of information application. Confidentiali	on is required by 37 CFR 1.3 ty is governed by 35 U.S.C.	11. The information 122 and 37 CFR 1	n is required to	obtain ction is	or retain a benefit by t estimated to take 12 i	he public which is to file (an ninutes to complete, includi	d by the USPTO to process)

all application. Confidentially is governed by 35 0.3.C. 122 and 37 CFR 1.14. This confection is estimated to take 12 finitions to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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3576 UNOCAL SANTA ROSA,	•	1773 DATE MAILED: 06/09/2000	5	

Determination of Patent Term Extension or Adjustment under 35 U.S.C. 154 (b)

A reissue patent is for "the unexpired part of the term of the original patent." See 35 U.S.C. 251. Accordingly, the above-identified reissue application is not eligible for Patent Term Extension or Adjustment under 35 U.S.C. 154(b).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 or (571)-272-4200.